

PART B - FEE(S) TRANSMITTAL

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James D. DeCamp, Ph.D.
 Clark & Elbing, LLP
 101 Federal St
 Boston, MA 02110

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Megan Kiley	(Depositor's name)
<i>Megan Kiley</i>	(Signature)
January 24, 2007	(Date)

01/26/2007 FMETEK12 00000030 10758979

01 FC:2501 700.00 OP
 02 FC:1504 300.00 OP
 03 FC:8001 15.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10758,979	January 16, 2004	Frederick M. Ausubel	00786/408002	8737

TITLE OF INVENTION:

PHOTOLYASE NUCLEIC ACIDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700.00	\$300.00	\$0.00	\$1015.00	02/09/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
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ROBINSON, HOPE A. 1652 536-023100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Clark & Elbing, LLP

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The General Hospital Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Boston, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☒ A check is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-2095 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date

Typed or printed name James D. DeCamp, Ph.D.

Registration No. 43,580

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PATENT
ATTORNEY DOCKET NO. 00786/408002

Certificate of Mailing: Date of Deposit: January 24, 2007

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Megan Kiley
Printed name of person mailing correspondence

Meg Kiley
Signature of person mailing correspondence

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Ausubel et al.	Confirmation No.:	8737
Serial No.:	10/758,979	Art Unit:	1652
Filed:	January 16, 2004	Examiner:	Hope A. Robinson
Customer No.:	21559		
Title:	PHOTOLYASE NUCLEIC ACIDS		

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REPLY TO NOTICE OF ALLOWABILITY AND NOTICE OF ALLOWANCE

In reply to the Notice of Allowability and Notice of Allowance that were mailed in connection with the above-captioned application on November 9, 2006, enclosed are:

A completed fee transmittal form PTOL-85; and

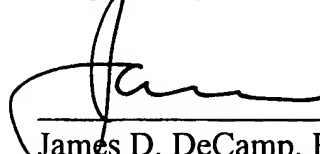
A check for \$1015.00 to cover the issue fee required by 37 C.F.R. § 1.18(a) of \$700.00, the publication fee required by 37 C.F.R. § 1.18(d) of \$300.00, and the patent copy fee required by 37 C.F.R. § 1.19(a)(1) of \$15.00 for five patent copies.

If there are any other charges or any credits, please apply them to Deposit Account

No. 03-2095.

Respectfully submitted,

Date: 1/21/2007



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